



City of Seattle Charles Rover, Mayor King County Randy Revelle, Executive

## **Seattle-King County Department of Public Health**

August 20, 1985

Harold E. Varmus, MD Professor of Molecular Virology Department of Microbiology UCSF School of Medicine San Francisco. California 94143

Dear Dr. Varmus,

Thank you for your letter of August 12 concerning AIDS virus nomenclature.

In my opinion, the agent will be referred to colloquially as the "AIDS virus" for at least the next couple of decades, regardless of its official name. I envision the following conversation occurring repeatedly: MD: "Your blood test shows infection with XYZ virus." Patient: "What does it do?" MD: "It causes several problems, although most persons remain well. But one thing it can do is cause AIDS." Patient: "Oh, shit." The remainder of the conversation focuses on AIDS and the fears surrounding that disease.

I feel that the official name should disassociate this virus from the HTLV series, to which it is only remotely related. Despite its historical priority, "Lymphadenopathy associated virus" is essentially inaccurate, since lymphadenopathy is a relatively small part of the spectrum of AIDS. Of the current terms in use, I have come to favor Jay Levy's "AIDS-associated retrovirus.

In summary, I see no compelling reason to eliminate AIDS from the official name, since it will be associated forever with that disease regardless of its name. Accordingly, why not follow the historical precedent of naming retroviruses for the diseases with which they are prominently associated?

Finally, a personal note: I would not expect you to recall that I was a third year clerk on Medicine at P&S while you were either an intern or first year resident (I think intern; it was the Summer of 1966.) Nice to hear from you.

Sincerely.

H. Hunter Handsfield, MD

Director, STD Control Program

Associate Professor of Medicine University of Washington

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